

Approved for use through 09/30/2000
Palent and Trademark Office; U.S. DEPARTMENT
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid ON

STATEMENT	UNDER 37 CFR 3.73	<u>(b)</u>
Applicant/Patent Owner: Gradipore Limited		
Application No./Patent No.: 09/470,823		12/23/1999
Entitled:REMOVAL OF BIOLOGICAL CONT	AMINANTS	**
Gradipore Limited, a	Corporation	
(Name of Assignee) (Typ	pe of Assignee, e.g., corporation, partne	ership, university, government age
states that it is:	Corporation  e of Assignee, e.g., corporation, partner  or  of either:	
1.	or (	
2. an assignee of an undivided part interest		<b>%</b>
in the patent application/patent identified above by virtue	of either:	0
A. [x] An assignment from the inventor(s) of the patent appl Patent and Trademark Office at Reel <u>e11759</u> , Frame	ication/patent identified above.	The assignment was reco
OR.		
B.[] A chain of title from the inventor(s), of the patent applic	cation/patent identified above, to	the current assignee as sh
1. From:	To:	
The document was recorded in the Patent and Reel, Frame, or for wh	ich a copy thereof is attached	
2. From:	To:	
The document was recorded in the Patent and Reel, Frame, or for whether the second sec	Fragemark Office at	
3. From:	To:	
The document was recorded in the Patent and Reel, Frame, or for wi	l Trademark Office at	. \
[ ] Additional documents in the chain of title are		,
[ ] Copies of assignments or other documents in the chain NOTE: A separate copy (i.e., the original assignment must be submitted to Assignment Division in accordan recorded in the records of the PTO. See MPEP 302-30	document or a true copy of the operation of the control of the asset o	original document) signment is to be
The undersigned (whose title is supplied below) is empower	ed to sign this statement on bel	nalf of the assignee.
1/ April 2002	150	<u> </u>
Date	Signature Voka W	9 1
	Typed or printed	C. Luluna
	Title	- wary row

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual c on the amount of time you are required to complete this form should be sent to the Oriel Information Officer, Patent and Trademark Offi 2021. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washing

PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Pateur full Trademark Office; U.S. DEPARTMENT OF COMMERCE work Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid One number. ase type a plus sign (+) inside this box -

09/470,823
12/23/1999
Brendon Conlan
EMOVAL OF
1741
A. Phasge
56104576-21

I hereby appoint		St. Autom		
Practitione	rs at Customer Number	26453 Place Customer Number Bar Code Label here		
	(s) named below:			
	Name	Registration Number		
	James David Jacobs, Esq.	24,299		
	Frank M. Gasparo, Esq.	44,700		
	Eunhee Park, Esq.	42,976		
as my/our attorney business in the Ur	y(s) or agent(s) to prosecute the a nited States Patent and Tradema	application identified above, and to transact all rk Office connected therewith.		
The above-m	e correspondence address for the entioned Customer Number.  at Customer Number 26	above-identified application to:    Place Customer   Number Bar Code   Label here		
Firm or Individual Nam	e	Frank M. Gasparo, Esq.		
Address		Baker & McKenzie		
Address		805 Third Avenue		
City	New York	State NY Zip 10022		
Country	United States	A		
Telephone	(212) 751-570	0 Fax (212) 759-9133		
I am the: Applicant/ Assignee Statemeni	Inventor. of record of the entire interest. So t under 37 CFR 3.73(b) is enclos	se 37 CFR 3.71. ad. (Form PTOISBI96).		
	SIGNATURE of Applica	ant or Assignee of Record		
Name	yola Man	ufu		
Signature	Signature V. Z			
Date	11 April 2013			
NOTE: Signatures of all to forms if more than one signature.	he inventors or assignees of record of th gnature is required, see below*.	e entire interest or their representative(s) are required. Submit multiple		
Total of 1	forms are submitted.			

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademart Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



Please type a plus sign (+) inside this box

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## **REVOCATION OF POWER OF ATTORNEY OR AUTHORIZATION OF AGENT**

Application Number	09/470,823	
Filing Date	12/23/1999	
First Named Inventor	Brendon Conlan	
Group Art Unit	1741	
Examiner Name	A Phasge	
Attorney Docket Number	56104576-21	

I hereby revoke application:	all previous	powers of attorney or au	thorizations of a	agent given i	n the above-	identified
x A Power	of Attorney o	r Authorization of Agent i	s submitted he	rewith.		
OR						
Please ch	ange the cor	respondence address for	the above-ider	ntified applica	ation to:	
<b></b> Cu	stomer Numl	ber 26453		• [	Place Cus Number Ba Label here	ar Code
OR				_		
Firm or Individual Nam			Frank M. Gas	paro, Esq.		
Address		Baker & McKenzie				
Address		805 Third Avenue				
City	1	New York				
Country	Uı	nited States	State	State NY ZIP 10022		10022
Telephone		(212) 751-5700	Fax	(212) 750-0133		-9133
I am the:  Applicant  Assigned Statement	e of record of	f the entire interest. See 3 SFR 3.73(b) is enclosed. (	37 CFR 3.71. (Form PTO/SB/	96)		QQ.
		SIGNATURE of Applicant	or Assignee of	Record		TO ON
Name		vola Manuse	1			\ E
Signature		vohn Manusu V. 5 11 April 2a				
Date						
NOTE: Signatures of a forms if more than one	all the inventors e signature is re	or assignees of record of the equired, see below*.	ntire interest or the	ir representativ	e(s) are require	d. Submit multiple
Total of 1	forms are	submitted.			•	

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



Please type a plus sign (+) inside this box -> +

PTO/SB/21 (6-98)

a type a plus sign (+) inside this box 

+ Approved for use through 09/30/2000. OMB 0651-0031

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

	Applicati n Numb r	09/887,371
<b>TRANSMITTAL</b>	Filing Date	6/22/2001
FORM	First Named Inventor	Brendon Conlan
(to be used for all correspondence after initial filing)	Group Art Unit	1741
	Examiner Name	TBA
Total Number of Pages in This Submission 4	Attorney Docket Number	56104576-22
EVOL	DOUBER (-tt#4t-4	.1

ENCLOSURES (check all that apply)				
Fee Transmittal Form	Assignment Papers (for an Application)	After Allowance Communication to Group		
Fee Attached	Drawing(s)	Appeal Communication to Board of Appeals and Interferences		
Amendment / Response	Licensing-related Papers	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)		
After Final	Petition Routing Slip (PTO/SB/69) and Accompanying Petition	Proprietary Information		
Affidavits/declaration(s)	Petition to Convert to a Provisional Application	Status Letter		
Extension of Time Request	Power of Attorney, Revocation Change of Correspondence Address	Additional Enclosure(s) (please identify below):		
Express Abandonment Request	Terminal Disclaimer	Statement Under 37 CFR 3.73(b); return receipt postcard.		
[	Small Entity Statement	,		
Information Disclosure Statement	Request for Refund	$  M_{A_{II}}  $		
Certified Copy of Priority Document(s)	Remarks	1111		
	Remarks	222		
Response to Missing Parts/ Incomplete Application	All documents are copies from the parent ap	plication, striat 1 09/470,823. ' < 1002		
Response to Missing		"UP 1		
Parts under 37 CFR 1.52 or 1.53		' <i>'</i>		
SIGNATU	RE OF APPLICANT, ATTORNEY, OR			
Firm				
or Frank M. Ga	Spano .			
Signature	11/1/			
Date 7/12/2002				
CERTIFICATE OF MAILING				
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an				

envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: 7/12/2002

Typed or printed name Frank MD Gasparo 7/12/2002

Burden Hour Statement: The form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be send to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



Creation date: 01-03-2004

Indexing Officer: IAMOAH - IGNATIUS AMOAH

Team: OIPEBackFileIndexing

Dossier: 09887371

Legal Date: 08-15-2002

Total number of pages: 1

No.	Doccode	Number of pages
1	CTMS ·	1

Remarks:

Order of re-scan issued on .....